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TECHNICAL SERVICE BULLETIN #167

Product: Narkomed 6000

Date: May 9, 2000

Re: Announcement of Narkomed 6000 enhancement for Divan guard installation.

Reference Doc: ECR/ECN # 00-0326

Reason/Rational: Draeger Medical, Inc. (DMI) has released a modification to add a guard block to Divan control module assembly required for all existing Narkomed 6000's in the field.

Solution/Procedure: Service Procedure SP00194 contains comprehensive installation instructions to perform required modification. A field enhancement report shall be promptly returned to DrägerService by the technician or ASO at the completion of each machine upgrade by completing the Field Enhancement report on page 2.

Devices affected: Narkomed 6000's serial number ranges: 10008, 10011-10229, 10231, 10234, 10235, 10238-10350, 10352-10375, 10377-10401, 10403-10413, 10415-10455, 10459-10487

Timing/When: Next scheduled maintenance or emergency service call.

Additional Info:

Cost: These parts are offered at no charge for this program, however this TSB 167 and the affected serial number must be referenced on the Purchase Order.

Ordering Info/Parts:

1 each	4116383	BLOCK-GUARD-DIVAN
1 each	1329294	SCR-CAP SKT HD M4X16 DIN 912
1 each	HW65011	WASHER-LOCK SPLIT #8 SS
1 each	HW66002	WASHER-FLAT #8 SS

Distribution: All Authorized Service Organizations, DrägerService

If you have any questions, please contact Technical Support by phone at 1-800-543-5047 or by fax at 1-215-721-5789.

DrägerService
3122 Commerce Drive
Telford, PA 18969
Tel: (215) 721-5402
(800) 543-5047
Fax: (215) 723-5935
Web: www.draegermedical.com
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FIELD ENHANCEMENT REPORT
NARKOMED 6000 DIVAN GUARD ENHANCEMENT

After each modification is successfully completed or verified to been performed previously, a check mark shall be entered in the PASS box, and initials entered into the TSR Initials box. A Technicians signature is required at the completion of each machine's upgrade. Within 24 hours of the completion of the upgrade the report shall be faxed to at 215-723-5935, or mail to:

DrägerService
3122 Commerce Drive
Telford, PA 18969
Attention: Ken Horsfield

Hospital Name and Complete Address:

_____

_____

_____ Machine S/N _____

_____ Divan S/N _____

FIELD ENHANCEMENT	ECN # REFERENCE	PASS	TSR INITIALS
1. Install Divan guard per Service Procedure SP00194	00-0326, 00-0400		
2. Test Divan PEEP valve operation per Narkomed 6000 Technical Service Manual Section 6.18.10.	99-1145		

Technician: _____ I.D. # _____ DATE: _____

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